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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/521,198
Filing Date	January 13, 2005
First Named Inventor	Strömqvist
Art Unit	
Examiner Name	
Attorney Docket Number	67156-78278

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, ~~and~~

- ☐ all the attorneys/agents of record.
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NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Leaving the employ of Customer No. 26288

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Name	Olivia Tolan	Registration No.	45,161
Date	June 28, 2006	Telephone No.	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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